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Bib Data Sheet

CONFIRMATION NO. 8189

<b>SERIAL NUMBER</b> 09/464,866	<b>FILING OR 371(c) DATE</b> 12/16/1999 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2683	<b>ATTORNEY DOCKET NO.</b> PHA-23.884	
<b>APPLICANTS</b> RICHARD BRYAN SAGAR, SANTA CLARA, CA; <b>** CONTINUING DATA *****</b> <i>None</i> <b>** FOREIGN APPLICATIONS *****</b> <i>None</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/28/2000</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 10	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 24738 <i>[Signature]</i>					
<b>TITLE</b> SHARED ADDRESS-DATA SERVICE FOR PERSONAL CE EQUIPMENT					
<b>FILING FEE RECEIVED</b> 760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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<b>SERIAL NUMBER</b> 09/464,866	<b>FILING DATE</b> 12/16/1999 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2684	<b>ATTORNEY DOCKET NO.</b> PHA-23.884	
<b>APPLICANTS</b> RICHARD BRYAN SAGAR, SANTA CLARA, CA; <b>** CONTINUING DATA *****</b> <i>None</i> <b>** FOREIGN APPLICATIONS *****</b> <i>None</i> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <i>None</i> <b>** 01/28/2000</b>					
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<b>ADDRESS</b> PHILIPS ELECTRONICS NORTH AMERICA CORPORATION CORPORATE INTELLECTUAL PROPERTY 1000 WEST MAUDE AVE SUNNYVALE, CA 94085					
<b>TITLE</b> SHARED ADDRESS-DATA SERVICE FOR PERSONAL CE EQUIPMENT					
<b>FILING FEE RECEIVED</b> 760	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

SERIAL NUMBER 09/464,866	FILING DATE 12/16/99	CLASS 455	GROUP ART UNIT 2749	ATTORNEY DOCKET NO. PHA-23.884
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APPLICANT

RICHARD BRYAN SAGAR, SANTA CLARA, CA.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED

NONE *psl*

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED

NONE *psl*

\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED

NONE *psl*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 01/28/00

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 2	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 2
Verified and Acknowledged <i>psl</i> Examiner's Initials _____ Initials _____					

ADDRESS

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580 WHITE PLAINS ROAD  
TARRYTOWN NY 10591

TITLE

SHARED ADDRESS-DATA SERVICE FOR PERSONAL CE EQUIPMENT

FILING FEE RECEIVED  \$760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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